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NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

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## PART B - FEE(S) TRANSMITTAL

Confidete and send his form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

TRUCTIONS: This form she imporiate. All further corresponding the corresponding to the corres	RESS (Now: Use Black I for say 06/29/2005 GOODRICH & RO	change of address)	UBLICATION FEE (If re- ication of maintenance feet new correspondence address Note: A certificate Fee(s) Transmittal, nances, Each addition	quired). Blocks I through 5 will be mailed to the curren se; and/or (b) indicating a se;	should be completed where		
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			I hereby certify that States Postal Service addressed to the I	I hereby certify that this Fer(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class small in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimale transmitted to the USPTO (703) 746-4000, on the date indicated below.			
			DENSITURED TO GIVE U	SF10 (105) 140-4000, 04 040	(Depositor's name)		
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APPLICATION NO.	FILING DATE	FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/081,974	02/21/2002	Joseph Ri		12636-263	2253 .		
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